



## EXPRESS MAIL CERTIFICATE

DOCKET NO. : GFM-00101 (803970/100)  
APPLICANT : Paul Gulko  
TITLE : METHOD AND APPARATUS FOR PERFORMING  
INSURANCE INSOLVENCY OPERATIONS

Certificate is attached to the **Request for Continued Examination (RCE)**  
**Transmittal Letter (1 page) in duplicate** and **Fee Transmittal Letter (1 page) in**  
**duplicate** of the above-named application.

“EXPRESS MAIL” NUMBER: EV685739065US  
DATE OF DEPOSIT: January 13, 2006

I hereby certify that this paper or fee is being deposited with the United States  
Postal Service “Express Mail Post Office to Addressee” service under 37 CFR 1.10 on the  
date indicated above and is addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box  
1450, Alexandria, VA 22313-1450.

**Shawn A. Lockett**

(Typed or printed name of person mailing  
paper or fee)

(Signature of person mailing paper or fee)



**EXPRESS MAIL CERTIFICATE**

DOCKET NO. : GFM-00101 (803970/100)  
APPLICANT : Paul Gulko  
TITLE : METHOD AND APPARATUS FOR PERFORMING  
INSURANCE INSOLVENCY OPERATIONS

Certificate is attached to the **Request for Three-Month Extension of Time**  
**(1 page) in duplicate** of the above-named application.

"EXPRESS MAIL" NUMBER: EV685739065US  
DATE OF DEPOSIT: January 13, 2006

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**Shawn A. Lockett**

(Typed or printed name of person mailing  
paper or fee)

A handwritten signature in black ink, appearing to read "Shawn A. Lockett", written over a horizontal line.

(Signature of person mailing paper or fee)



**EXPRESS MAIL CERTIFICATE**

DOCKET NO. : **GFM-00101 (803970/100)**  
APPLICANT : **Paul Gulko**  
TITLE : **METHOD AND APPARATUS FOR PERFORMING  
INSURANCE INSOLVENCY OPERATIONS**

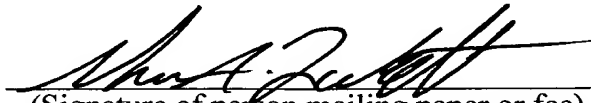
Certificate is attached to the **Amendment (22 pages)** of the above-named application.

"EXPRESS MAIL" NUMBER: **EV685739065US**  
DATE OF DEPOSIT: **January 13, 2006**

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**Shawn A. Lockett**

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paper or fee)

  
(Signature of person mailing paper or fee)

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
<div style="border: 2px solid black; border-radius: 50%; padding: 10px; display: inline-block;"> <b>OFFICE OF THE COMPTROLLER OF THE PATENT &amp; TRADEMARK OFFICE</b>  <b>FOR FY 2005</b>          JAN 13 2006       </div>		Application Number	09/745,0111
		Filing Date	December 20, 2000
		First Named Inventor	Paul Gulko
		Examiner Name	Vanel Frenel
		Art Unit	3626
Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	GFM-00101 (803970/100)
TOTAL AMOUNT OF PAYMENT (\$600)			

**METHOD OF PAYMENT** (check all that apply)

☒ Check  
 ☐ Credit Card  
 ☐ Money Order  
 ☐ None  
 ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account  
 Deposit Account Number: 14-1138  
 Deposit Account Name: Nixon Peabody LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below  
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  
 ☒ Credit any overpayments

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**FEE CALCULATION**

**1. BASIC FILING, SEARCH AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims** 111 - 99 or HP = 12  
 Extra Claims 12 x \$50 = \$600  
 Fee Paid (\$): \$600

HP = highest number of total claims paid for, if greater than 20

**Indep. Claims** 3 - 3 or HP = 0  
 Extra Claims 0 x \$100 = \$0  
 Fee Paid (\$): \$0

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets** \_\_\_\_\_ - 100 = \_\_\_\_\_  
 Extra Sheets \_\_\_\_\_ / 50 = \_\_\_\_\_  
 Number of each additional 50 or fraction thereof \_\_\_\_\_ (round up to a whole number)  
 Fee (\$): \_\_\_\_\_  
 Fee Paid (\$): \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount) \_\_\_\_\_

Other: \_\_\_\_\_

**SUBMITTED BY**

Signature	<u>Gunnar Leinberg</u>	Registration No. 35,584 (Attorney/Agent)	Telephone (585) 263-1014
Name (Print/Type)	Gunnar G. Leinberg	Date	January 13, 2006

**CERTIFICATE OF MAILING OR TRANSMISSION [35 CFR 1.8(a)]**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop \_\_\_\_\_, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at \_\_\_\_\_, on \_\_\_\_\_.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_